

County: Outagamie
 ANNA JOHN NURSING HOME
 W846 COUNTY ROAD EE

Facility ID: 6660

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ONEIDA 54155 Phone: (920) 869-2797
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/03): 48
 Total Licensed Bed Capacity (12/31/03): 48
 Number of Residents on 12/31/03: 26

Ownership: Tribal Government
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? No
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 29

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		19.2
Supp. Home Care-Personal Care	No					1 - 4 Years		46.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	11.5	More Than 4 Years		26.9
Day Services	No	Mental Illness (Org./Psy)	19.2	65 - 74	3.8			-----
Respite Care	No	Mental Illness (Other)	3.8	75 - 84	38.5			92.3
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	34.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	15.4	65 & Over	88.5	-----		
Transportation	No	Cerebrovascular	15.4		-----	RNs		15.4
Referral Service	No	Diabetes	15.4	Gender	%	LPNs		13.3
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	26.9	Male	15.4	Aides, & Orderlies		
Mentally Ill	No		-----	Female	84.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	22	100.0	144	0	0.0	0	3	75.0	125	0	0.0	0	0	0.0	0	25 96.2
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	1	25.0	125	0	0.0	0	0	0.0	0	1 3.8
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		22	100.0		0	0.0		4	100.0		0	0.0		0	0.0	26	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	28.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	76.9	23.1	26
Other Nursing Homes	8.0	Dressing	19.2	61.5	19.2	26
Acute Care Hospitals	64.0	Transferring	34.6	34.6	30.8	26
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	34.6	57.7	7.7	26
Rehabilitation Hospitals	0.0	Eating	80.8	7.7	11.5	26
Other Locations	0.0	*****				
Total Number of Admissions	25	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		0.0
Private Home/No Home Health	21.4	Occ/Freq. Incontinent of Bladder	61.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	14.3	Occ/Freq. Incontinent of Bowel	11.5	Receiving Suctioning		0.0
Other Nursing Homes	7.1			Receiving Ostomy Care		3.8
Acute Care Hospitals	21.4	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	3.6	Physically Restrained	7.7	Receiving Mechanically Altered Diets		23.1
Rehabilitation Hospitals	0.0					
Other Locations	7.1	Skin Care		Other Resident Characteristics		
Deaths	25.0	With Pressure Sores	3.8	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	28			Receiving Psychoactive Drugs		46.2

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	60.4	87.8	0.69	84.7	0.71	88.1	0.69	87.4	0.69
Current Residents from In-County	46.2	86.6	0.53	77.5	0.60	82.1	0.56	76.7	0.60
Admissions from In-County, Still Residing	12.0	34.3	0.35	25.1	0.48	20.1	0.60	19.6	0.61
Admissions/Average Daily Census	86.2	71.2	1.21	104.2	0.83	155.7	0.55	141.3	0.61
Discharges/Average Daily Census	96.6	73.5	1.31	107.9	0.90	155.1	0.62	142.5	0.68
Discharges To Private Residence/Average Daily Census	34.5	24.3	1.42	28.9	1.19	68.7	0.50	61.6	0.56
Residents Receiving Skilled Care	96.2	89.5	1.07	93.8	1.03	94.0	1.02	88.1	1.09
Residents Aged 65 and Older	88.5	84.0	1.05	95.8	0.92	92.0	0.96	87.8	1.01
Title 19 (Medicaid) Funded Residents	84.6	74.5	1.14	56.9	1.49	61.7	1.37	65.9	1.28
Private Pay Funded Residents	15.4	17.8	0.87	33.8	0.46	23.7	0.65	21.0	0.73
Developmentally Disabled Residents	0.0	2.8	0.00	1.4	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	23.1	55.2	0.42	38.3	0.60	35.8	0.64	33.6	0.69
General Medical Service Residents	26.9	17.5	1.54	16.9	1.59	23.1	1.16	20.6	1.31
Impaired ADL (Mean)	43.1	49.3	0.87	50.8	0.85	49.5	0.87	49.4	0.87
Psychological Problems	46.2	68.8	0.67	56.3	0.82	58.2	0.79	57.4	0.80
Nursing Care Required (Mean)	3.8	7.4	0.52	6.9	0.56	6.9	0.56	7.3	0.52